

[10123/04501]

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

021204
16310 U.S. PTO

Inventor(s) : **Kristian DiMatteo
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Serial No. : **To Be Assigned**

Filing Date : **Herewith**

For : **IMPROVED DIALYSIS CATHETER TIP**

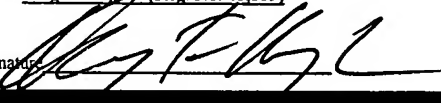
Group Art Unit : **To Be Assigned**

Examiner : **To Be Assigned**

17548 U.S. PTO
10/777545
021204

Commissioner for Patents
P.O. Box 1450
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Please associate the Customer No. 30636
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name:	<u>Oleg F. Kaplan (Reg. No. 45,559)</u>
Signature	

TRANSMITTAL

SIRS:

Enclosed herewith please find the following:

1. 1 sheet of Title Page, 14 sheets of Specifications, 4 sheets of Claims and 1 sheet of Abstract.
2. 4 sheets of Drawings.
3. Executed Declaration.

4. Executed Grant Power of Attorney.
5. Executed Assignment along with Recordation Cover Sheet and a check in the amount of \$40.00.
6. Returned Receipt Postcard.

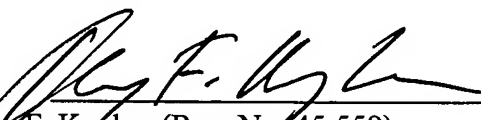
Please charge the Deposit Account of **Fay Kaplun & Marcin, LLP, No. 50-1492** in the amount of **\$842.00** for the filing fee calculated as shown below:

	NUMBER FILED	NUMBER EXTRA	Rate (\$)	FEE (\$)
PATENT APPLICATION - BASIC FEE				770.00
TOTAL CLAIMS	24 - 20 =	4	18.00	72.00
INDEPENDENT CLAIMS	2 - 3 =	0	86.00	
MULTIPLE DEPENDENT CLAIM PRESENT				0.00
*Number extra must be zero or larger			TOTAL	842.00
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The Commissioner is hereby authorized to charge the payment of any additional fees associated with this communication or arising during the pendency of this application, with the exception of the issue fee, to the Deposit Account of **Fay Kaplun & Marcin, LLP No. 50-1492**.

When payment of the issue fee has previously been provided or authorized, the Commissioner is hereby authorized to charge any post issuance fees required, except for patent maintenance fees, to the Deposit Account of **Fay Kaplun & Marcin, LLP No. 50-1492**. A copy of this transmittal letter is enclosed for Deposit Account purposes.

Date: February 12, 2004

By: 
Oleg F. Kaplun (Reg. No. 45,559)

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